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(54) **SYSTEMS AND METHODS FOR MANAGING REDUCED PRESSURE AT A PLURALITY OF WOUND SITES**

(56) **References Cited**

U.S. PATENT DOCUMENTS

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1,355,846 A	10/1920	Rannells
2,547,758 A	4/1951	Keeling
2,632,443 A	3/1953	Leshner
2,682,873 A	7/1954	Evans et al.
2,910,763 A	11/1959	Lauterbach
2,969,057 A	1/1961	Simmons
3,066,672 A	12/1962	Crosby, Jr. et al.
3,367,332 A	2/1968	Groves
3,520,300 A	7/1970	Flower, Jr.
3,568,675 A	3/1971	Harvey
3,648,692 A	3/1972	Wheeler

(Continued)

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FOREIGN PATENT DOCUMENTS

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AU	550575 A1	8/1982
AU	745271	4/1999

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OTHER PUBLICATIONS

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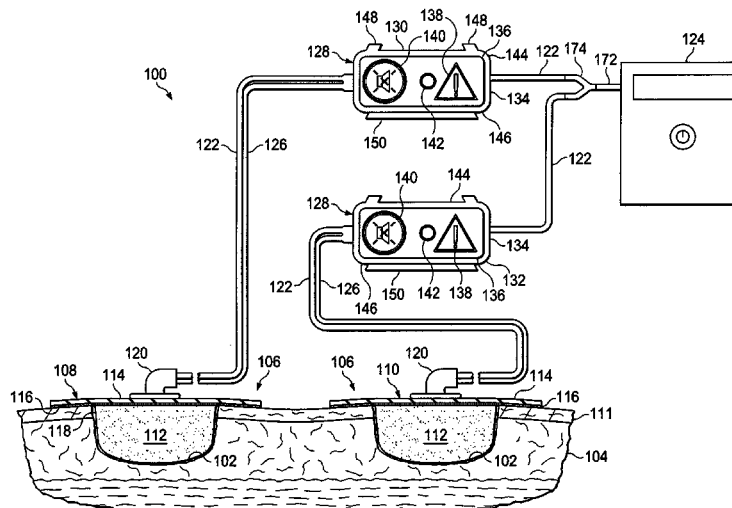
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(57) **ABSTRACT**

Systems and methods are presented for providing reduced pressure to and monitoring pressure at a plurality of tissue sites using a plurality of pressure management devices. The pressure management devices are associated with a plurality of sensing conduits that fluidly couple the pressure management devices and the plurality of tissue sites. Other systems, methods, and devices are disclosed.

See application file for complete search history.

18 Claims, 5 Drawing Sheets



(56)

References Cited

U.S. PATENT DOCUMENTS

3,682,180 A 8/1972 McFarlane
 3,826,254 A 7/1974 Mellor
 4,080,970 A 3/1978 Miller
 4,096,853 A 6/1978 Weigand
 4,139,004 A 2/1979 Gonzalez, Jr.
 4,165,748 A 8/1979 Johnson
 4,184,510 A 1/1980 Murry et al.
 4,233,969 A 11/1980 Lock et al.
 4,245,630 A 1/1981 Lloyd et al.
 4,256,109 A 3/1981 Nichols
 4,261,363 A 4/1981 Russo
 4,275,721 A 6/1981 Olson
 4,284,079 A 8/1981 Adair
 4,297,995 A 11/1981 Golub
 4,333,468 A 6/1982 Geist
 4,373,519 A 2/1983 Errede et al.
 4,382,441 A 5/1983 Svedman
 4,392,853 A 7/1983 Muto
 4,392,858 A 7/1983 George et al.
 4,419,097 A 12/1983 Rowland
 4,465,485 A 8/1984 Kashmer et al.
 4,475,909 A 10/1984 Eisenberg
 4,480,638 A 11/1984 Schmid
 4,525,166 A 6/1985 Leclerc
 4,525,374 A 6/1985 Vaillancourt
 4,540,412 A 9/1985 Van Overloop
 4,543,100 A 9/1985 Brodsky
 4,548,202 A 10/1985 Duncan
 4,551,139 A 11/1985 Plaas et al.
 4,569,348 A 2/1986 Hasslinger
 4,605,399 A 8/1986 Weston et al.
 4,608,041 A 8/1986 Nielsen
 4,640,688 A 2/1987 Hauser
 4,655,754 A 4/1987 Richmond et al.
 4,664,662 A 5/1987 Webster
 4,710,165 A 12/1987 McNeil et al.
 4,733,659 A 3/1988 Edenbaum et al.
 4,743,232 A 5/1988 Kruger
 4,758,220 A 7/1988 Sundblom et al.
 4,787,888 A 11/1988 Fox
 4,826,494 A 5/1989 Richmond et al.
 4,838,883 A 6/1989 Matsuura
 4,840,187 A 6/1989 Brazier
 4,863,449 A 9/1989 Therriault et al.
 4,872,450 A 10/1989 Austad
 4,878,901 A 11/1989 Sachse
 4,897,081 A 1/1990 Poirier et al.
 4,906,233 A 3/1990 Moriuchi et al.
 4,906,240 A 3/1990 Reed et al.
 4,919,654 A 4/1990 Kalt et al.
 4,941,882 A 7/1990 Ward et al.
 4,953,565 A 9/1990 Tachibana et al.
 4,969,880 A 11/1990 Zamierowski
 4,985,019 A 1/1991 Michelson
 5,037,397 A 8/1991 Kalt et al.
 5,086,170 A 2/1992 Luheshi et al.
 5,092,858 A 3/1992 Benson et al.
 5,100,396 A 3/1992 Zamierowski
 5,134,994 A 8/1992 Say
 5,149,331 A 9/1992 Ferdman et al.
 5,167,613 A 12/1992 Karami et al.
 5,176,663 A 1/1993 Svedman et al.
 5,215,522 A 6/1993 Page et al.
 5,232,453 A 8/1993 Plass et al.
 5,261,893 A 11/1993 Zamierowski
 5,278,100 A 1/1994 Doan et al.
 5,279,550 A 1/1994 Habib et al.
 5,298,015 A 3/1994 Komatsuzaki et al.
 5,342,376 A 8/1994 Ruff
 5,344,415 A 9/1994 DeBusk et al.
 5,358,494 A 10/1994 Svedman
 5,437,622 A 8/1995 Carion
 5,437,651 A 8/1995 Todd et al.
 5,527,293 A 6/1996 Zamierowski
 5,549,584 A 8/1996 Gross

5,556,375 A 9/1996 Ewall
 5,607,388 A 3/1997 Ewall
 5,636,643 A 6/1997 Argenta et al.
 5,645,081 A 7/1997 Argenta et al.
 6,071,267 A 6/2000 Zamierowski
 6,135,116 A 10/2000 Vogel et al.
 6,241,747 B1 6/2001 Ruff
 6,287,316 B1 9/2001 Agarwal et al.
 6,345,623 B1 2/2002 Heaton et al.
 6,488,643 B1 12/2002 Tumey et al.
 6,493,568 B1 12/2002 Bell et al.
 6,553,998 B2 4/2003 Heaton et al.
 6,814,079 B2 11/2004 Heaton et al.
 2002/0077661 A1 6/2002 Saadat
 2002/0115951 A1 8/2002 Norstrom et al.
 2002/0120185 A1 8/2002 Johnson
 2002/0143286 A1 10/2002 Tumey
 2006/0025727 A1* 2/2006 Boehringer et al. 604/313
 2007/0265586 A1* 11/2007 Joshi et al. 604/313
 2008/0004549 A1 1/2008 Anderson et al.
 2008/0041401 A1 2/2008 Casola et al.
 2008/0300578 A1* 12/2008 Freedman 604/543

FOREIGN PATENT DOCUMENTS

AU 755496 2/2002
 CA 2005436 6/1990
 DE 26 40 413 A1 3/1978
 DE 43 06 478 A1 9/1994
 DE 295 04 378 U1 10/1995
 DE 10 2006 051223 A1 11/2007
 EP 0100148 A1 2/1984
 EP 0117632 A2 9/1984
 EP 0161865 A2 11/1985
 EP 0358302 A2 3/1990
 EP 1018967 B1 8/2004
 GB 692578 6/1953
 GB 2 195 255 A 4/1988
 GB 2 197 789 A 6/1988
 GB 2 220 357 A 1/1990
 GB 2 235 877 A 3/1991
 GB 2 333 965 A 8/1999
 GB 2 329 127 B 8/2000
 JP 4129536 4/1992
 SG 71559 4/2002
 WO WO 80/02182 10/1980
 WO WO 87/04626 8/1987
 WO WO 90/10424 9/1990
 WO WO 93/09727 5/1993
 WO WO 94/20041 9/1994
 WO WO 96/05873 2/1996
 WO WO 97/18007 5/1997
 WO WO 99/13793 3/1999
 WO WO 2008/100440 A1 8/2008
 WO 2009141820 A1 11/2009

OTHER PUBLICATIONS

N.A. Bagautdinov, "Variant of External Vacuum Aspiration in the Treatment of Purulent Diseases of the Soft Tissues," *Current Problems in Modern Clinical Surgery: Interdepartmental Collection*, edited by V. Ye Volkov et al. (Chuvashia State University, Cheboksary, U.S.S.R. 1986), pp. 94-96 (certified translation).
 Louis C. Argenta, MD and Michael J. Morykwas, PhD; "Vacuum-Assisted Closure: A New Method for Wound Control and Treatment: Clinical Experience"; *Annals of Plastic Surgery*, vol. 38, No. 6, Jun. 1997; pp. 563-576.
 Susan Mendez-Eastmen, RN; "When Wounds Won't Heal" *RN Jan.* 1998, vol. 61 (1); Medical Economics Company, Inc., Montvale, NJ, USA; pp. 20-24.
 James H. Blackburn, II, MD, et al; "Negative-Pressure Dressings as a Bolster for Skin Grafts"; *Annals of Plastic Surgery*, vol. 40, No. 5, May 1998, pp. 453-457.
 John Masters; "Reliable, Inexpensive and Simple Suction Dressings"; Letter to the Editor, *British Journal of Plastic Surgery*, 1998, vol. 51 (3), p. 267; Elsevier Science/The British Association of Plastic Surgeons, UK.

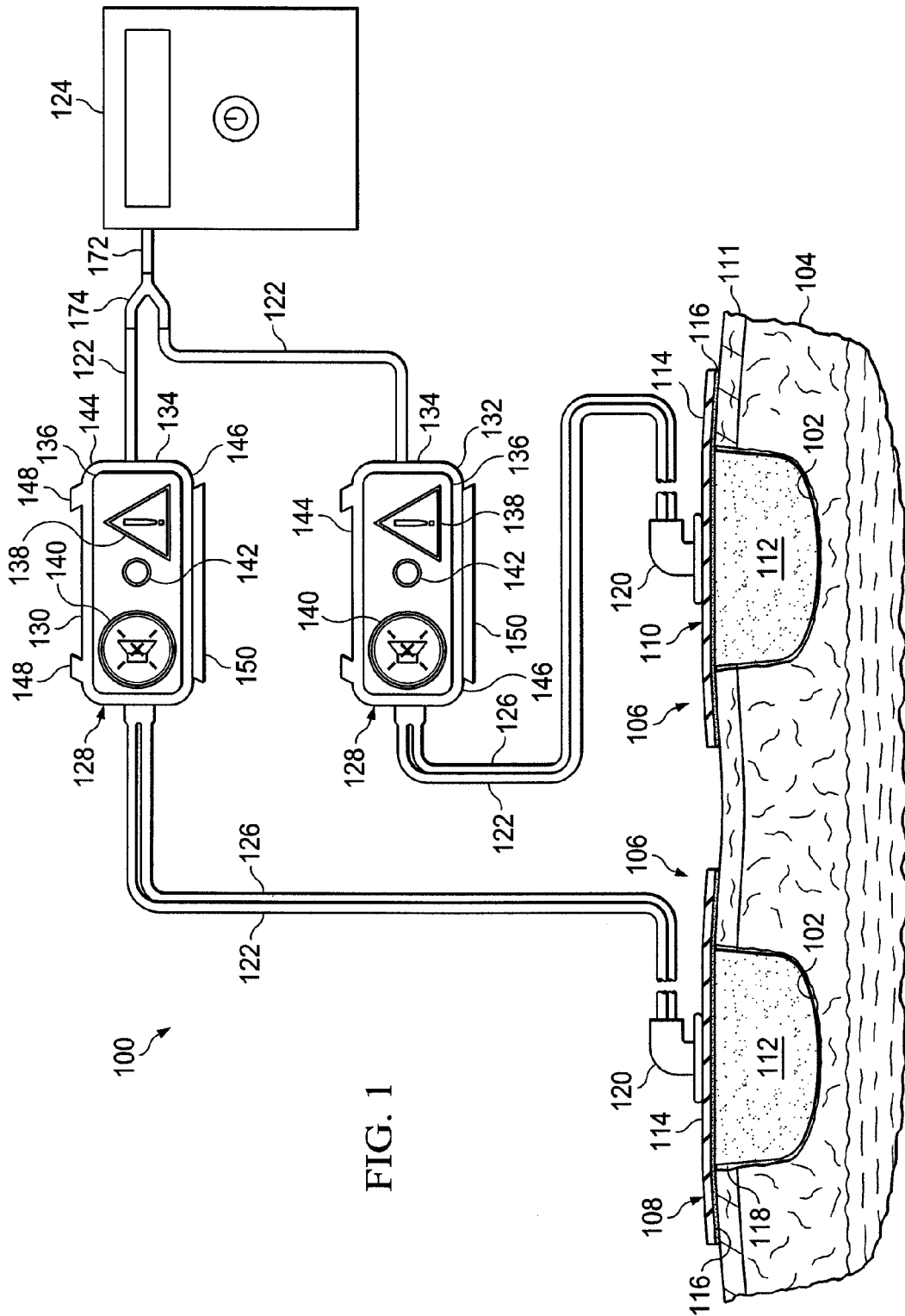
(56)

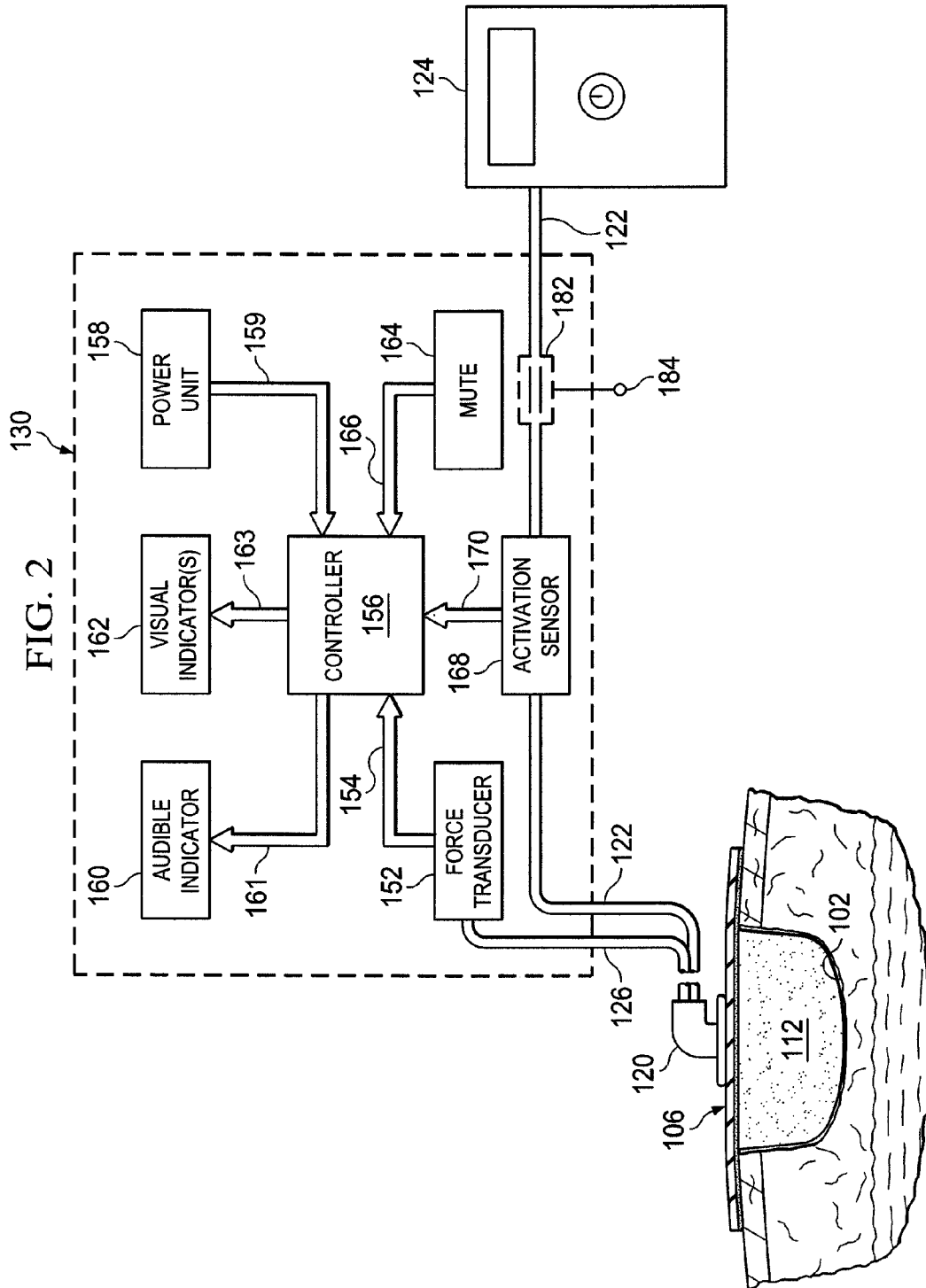
References Cited

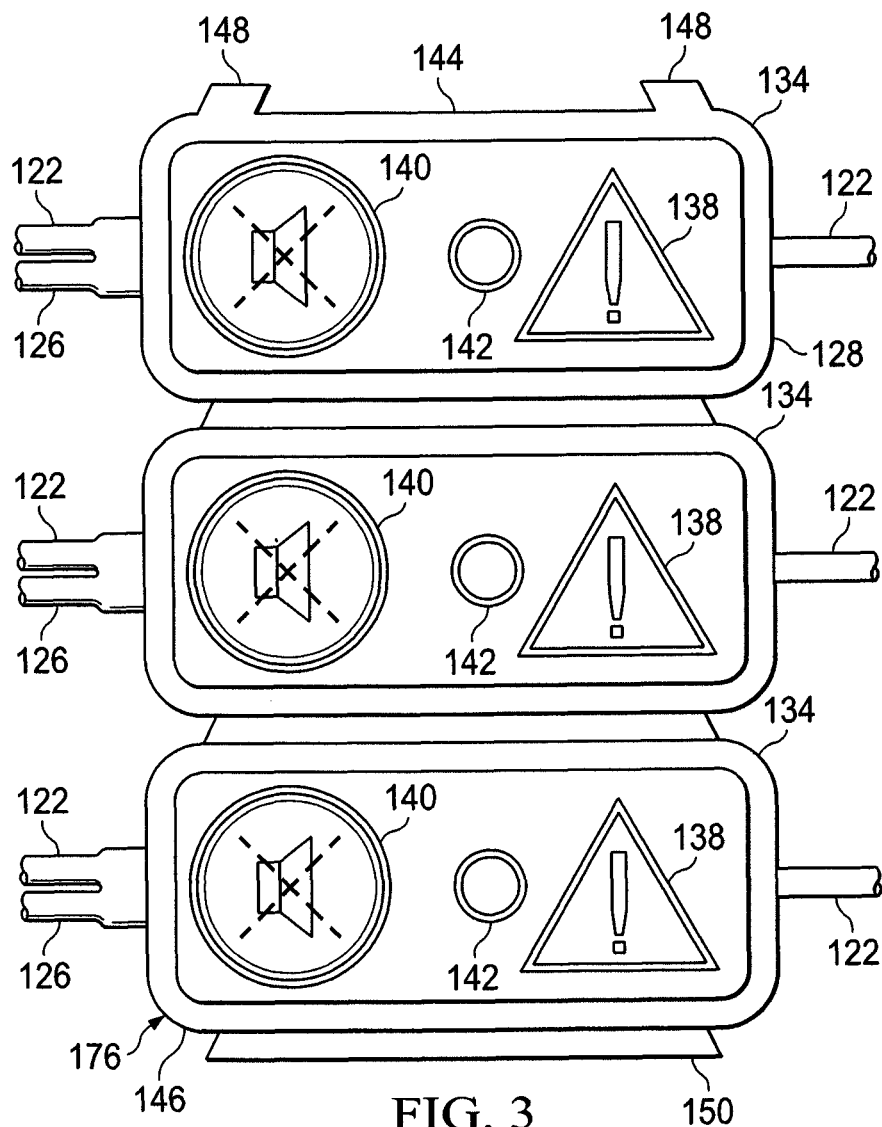
OTHER PUBLICATIONS

- S.E. Greer, et al "The Use of Subatmospheric Pressure Dressing Therapy to Close Lymphocutaneous Fistulas of the Groin" *British Journal of Plastic Surgery* (2000), 53, pp. 484-487.
- George V. Letsou, MD., et al; "Stimulation of Adenylate Cyclase Activity in Cultured Endothelial Cells Subjected to Cyclic Stretch"; *Journal of Cardiovascular Surgery*, 31, 1990, pp. 634-639.
- Orringer, Jay, et al; "Management of Wounds in Patients with Complex Enterocutaneous Fistulas"; *Surgery, Gynecology & Obstetrics*, Jul. 1987, vol. 165, pp. 79-80.
- International Search Report for PCT International Application PCT/GB95/01983; Nov. 23, 1995.
- PCT International Search Report for PCT International Application PCT/GB98/02713; Jan. 8, 1999.
- PCT Written Opinion; PCT International Application PCT/GB98/02713; Jun. 8, 1999.
- PCT International Examination and Search Report, PCT International Application PCT/GB96/02802; Jan. 15, 1998 & Apr. 29, 1997.
- PCT Written Opinion, PCT International Application PCT/GB96/02802; Sep. 3, 1997.
- Dattilo, Philip P., Jr., et al; "Medical Textiles: Application of an Absorbable Barbed Bi-directional Surgical Suture"; *Journal of Textile and Apparel, Technology and Management*, vol. 2, Issue 2, Spring 2002, pp. 1-5.
- Kostyuchenok, B.M., et al; "Vacuum Treatment in the Surgical Management of Purulent Wounds"; *Vestnik Khirurgi*, Sep. 1986, pp. 18-21 and 6 page English translation thereof.
- Davydov, Yu. A., et al; "Vacuum Therapy in the Treatment of Purulent Lactation Mastitis"; *Vestnik Khirurgi*, May 14, 1986, pp. 66-70, and 9 page English translation thereof.
- Yusupov, Yu. N., et al; "Active Wound Drainage", *Vestnik Khirurgi*, vol. 138, Issue 4, 1987, and 7 page English translation thereof.
- Davydov, Yu. A., et al; "Bacteriological and Cytological Assessment of Vacuum Therapy for Purulent Wounds"; *Vestnik Khirurgi*, Oct. 1988, pp. 48-52, and 8 page English translation thereof.
- Davydov, Yu. A., et al; "Concepts for the Clinical-Biological Management of the Wound Process in the Treatment of Purulent Wounds by Means of Vacuum Therapy"; *Vestnik Khirurgi*, Jul. 7, 1980, pp. 132-136, and 8 page English translation thereof.
- Chariker, Mark E., M.D., et al; "Effective Management of incisional and cutaneous fistulae with closed suction wound drainage"; *Contemporary Surgery*, vol. 34, Jun. 1989, pp. 59-63.
- Egnell Minor, Instruction Book, First Edition, 300 7502, Feb. 1975, pp. 24.
- Egnell Minor: Addition to the Users Manual Concerning Overflow Protection—Concerns all Egnell Pumps, Feb. 3, 1983, pp. 2.
- Svedman, P.: "Irrigation Treatment of Leg Ulcers", *The Lancet*, Sep. 3, 1983, pp. 532-534.
- Chinn, Steven D. et al.: "Closed Wound Suction Drainage", *The Journal of Foot Surgery*, vol. 24, No. 1, 1985, pp. 76-81.
- Arnljots, Björn et al.: "Irrigation Treatment in Split-Thickness Skin Grafting of Intractable Leg Ulcers", *Scand J. Plast Reconstr. Surg.*, No. 19, 1985, pp. 211-213.
- Svedman, P.: "A Dressing Allowing Continuous Treatment of a Biosurface", *IRCS Medical Science: Biomedical Technology, Clinical Medicine, Surgery and Transplantation*, vol. 7, 1979, p. 221.
- Svedman, P. et al.: "A Dressing System Providing Fluid Supply and Suction Drainage Used for Continuous or Intermittent Irrigation", *Annals of Plastic Surgery*, vol. 17, No. 2, Aug. 1986, pp. 125-133.
- K.F. Jeter, T.E. Tittle, and M. Chariker, "Managing Draining Wounds and Fistulae: New and Established Methods, *Chronic Wound Care*, edited by D. Krasner (Health Management Publications, Inc., King of Prussia, PA 1990), pp. 240-246.
- G. Živadinović, V. Đukić, Ž. Maksimović, Đ. Radak, and P. Peška, "Vacuum Therapy in the Treatment of Peripheral Blood Vessels," *Timok Medical Journal* 11 (1986), pp. 161-164 (certified translation).
- F.E. Johnson, "An Improved Technique for Skin Graft Placement Using a Suction Drain," *Surgery, Gynecology, and Obstetrics* 159 (1984), pp. 584-585.
- A.A. Safronov, Dissertation Abstract, *Vacuum Therapy of Trophic Ulcers of the Lower Leg with Simultaneous Autoplasty of the Skin* (Central Scientific Research Institute of Traumatology and Orthopedics, Moscow, U.S.S.R. 1967) (certified translation).
- M. Schein, R. Saadia, J.R. Jamieson, and G.A.G. Decker, "The 'Sandwich Technique' in the Management of the Open Abdomen," *British Journal of Surgery* 73 (1986), pp. 369-370.
- D.E. Tribble, An Improved Sump Drain-Irrigation Device of Simple Construction, *Archives of Surgery* 105 (1972) pp. 511-513.
- M.J. Morykwas, L.C. Argenta, E.I. Shelton-Brown, and W. McGuirt, "Vacuum-Assisted Closure: A New Method for Wound Control and Treatment: Animal Studies and Basic Foundation," *Annals of Plastic Surgery* 38 (1997), pp. 553-562 (Morykwas I).
- C.E. Tennants, "The Use of Hyperemia in the Postoperative Treatment of Lesions of the Extremities and Thorax," *Journal of the American Medical Association* 64 (1915), pp. 1548-1549.
- Selections from W. Meyer and V. Schmieden, *Bier's Hyperemic Treatment in Surgery, Medicine, and the Specialties: A Manual of Its Practical Application*, (W.B. Saunders Co., Philadelphia, PA 1909), pp. 17-25, 44-64, 90-96, 167-170, and 210-211.
- V.A. Solovev et al., Guidelines, The Method of Treatment of Immature External Fistulas in the Upper Gastrointestinal Tract, editor-in-chief Prov. V.I. Parahonyak (S.M. Kirov Gorky State Medical Institute, Gorky, U.S.S.R. 1987) ("Solovev Guidelines").
- V.A. Kuznetsov & N.A. Bagautdinov, "Vacuum and Vacuum-Sorption Treatment of Open Septic Wounds," in II All-Union Conference on Wounds and Wound Infections: Presentation Abstracts, edited by B.M. Kostyuchenok et al. (Moscow, U.S.S.R. Oct. 28-29, 1986) pp. 91-92 ("Bagautdinov II").
- V.A. Solovev, Dissertation Abstract, Treatment and Prevention of Suture Failures after Gastric Resection (S.M. Kirov Gorky State Medical Institute, Gorky, U.S.S.R. 1988) ("Solovev Abstract").
- V.A.C.® Therapy Clinical Guidelines: A Reference Source for Clinicians (Jul. 2007).

* cited by examiner







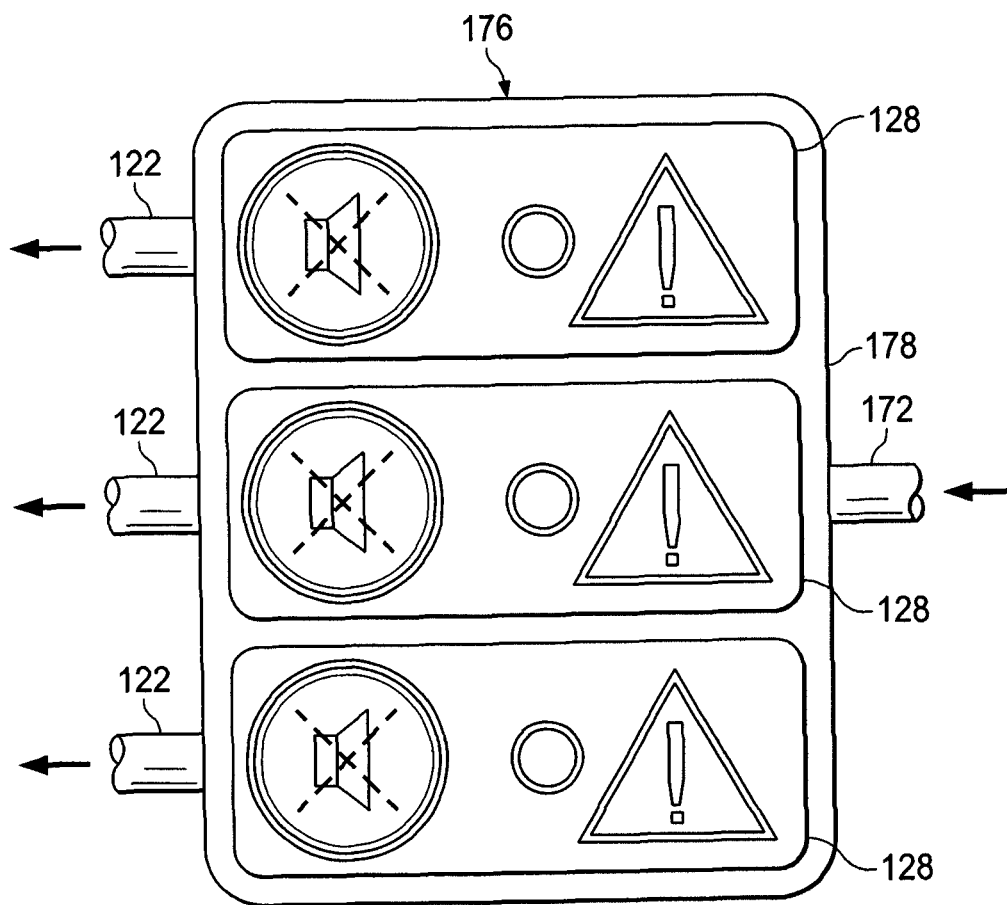


FIG. 4

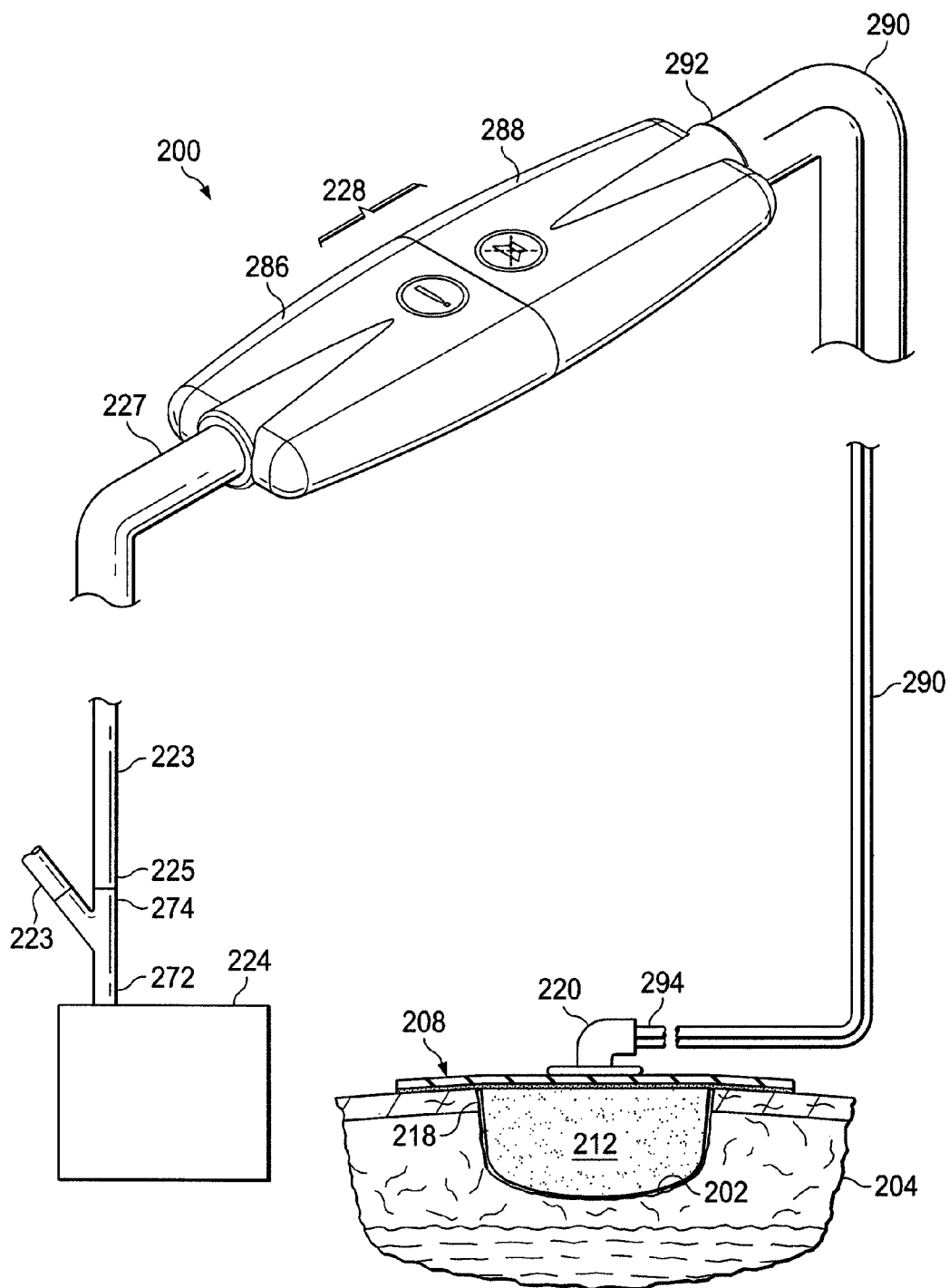


FIG. 5

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SYSTEMS AND METHODS FOR MANAGING REDUCED PRESSURE AT A PLURALITY OF WOUND SITES

RELATED APPLICATION

The present invention claims the benefit, under 35 USC § 119(e), of the filing of U.S. Provisional Patent Application Ser. No. 61/414,718, entitled "Systems and Methods for Managing Reduced Pressure at a Plurality of Wound Sites," filed 17 Nov. 2010, which is incorporated herein by reference for all purposes.

FIELD

The present disclosure relates generally to medical treatment systems and, more particularly, but not by way of limitation, to systems, devices, and methods for managing reduced pressure at a plurality of wound sites.

BACKGROUND

Clinical studies and practice have shown that providing a reduced pressure in proximity to a tissue site augments and accelerates the growth of new tissue at the tissue site. The applications of this phenomenon are numerous, but application of reduced pressure has been particularly successful in treating wounds. This treatment (frequently referred to in the medical community as "negative pressure wound therapy," "reduced pressure therapy," or "vacuum therapy") provides a number of benefits, which may include faster healing and increased formulation of granulation tissue. Typically, when applied to open wounds, reduced pressure is applied to tissue through a porous pad or other manifold device. The porous pad contains cells or pores that are capable of distributing reduced pressure to the tissue and channeling fluids that are drawn from the tissue. At times, a patient may have a large wound requiring treatment at numerous sites or has a plurality of tissue sites requiring treatment.

SUMMARY

According to some illustrative embodiments, systems and methods are presented for providing reduced pressure to and monitoring pressure at a plurality of tissue sites using a plurality of pressure management devices. The pressure management devices are associated with a plurality of sensing conduits that fluidly couple the pressure management devices and the plurality of tissue sites.

According to an illustrative embodiment, a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient includes a reduced-pressure source for providing reduced pressure, a plurality of reduced-pressure delivery conduits fluidly coupled to the reduced-pressure source, a plurality of reduced-pressure dressings fluidly coupled to the plurality of reduced-pressure delivery conduits in a one-to-one fashion, a plurality of pressure management devices, and a plurality of a sensing conduits fluidly coupled to the plurality of pressure management devices in a one-to-one fashion. Each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits and a reduced-pressure delivery conduit of the plurality of reduced-pressure delivery conduits associated with the reduced-pressure dressing. Each pressure management device of the plurality of pressure management devices may include a controller, a power unit electrically coupled to the controller for providing power to the controller, a force

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transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and an indicator coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

According to another illustrative embodiment, a method for managing reduced pressure at a plurality of tissue sites undergoing reduced pressure treatment on a patient includes providing a reduced-pressure source, fluidly coupling a plurality of reduced-pressure delivery conduits to the reduced-pressure source, disposing a plurality of reduced-pressure dressings proximate to the plurality of tissue sites, fluidly coupling the plurality of reduced-pressure dressings to the plurality of reduced-pressure delivery conduits in a one-to-one fashion, providing a plurality of pressure management devices, and fluidly coupling a plurality of a sensing conduits to the plurality of pressure management devices in a one-to-one fashion. Each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits and a reduced-pressure delivery conduit of the plurality of reduced-pressure delivery conduits associated with the reduced-pressure dressing. Each pressure management device of the plurality of pressure management devices may include a power unit electrically coupled to the controller for providing power to the controller, a force transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and an indicator coupled to the controller for indicating when insufficient pressure exists in the associated sensing conduit.

According to another illustrative embodiment, a method of manufacturing a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient includes providing a reduced-pressure source for providing reduced pressure, providing a plurality of reduced-pressure delivery conduits, fluidly coupling the plurality of reduced-pressure delivery conduits to the reduced-pressure source, providing a plurality of reduced-pressure dressings, providing plurality of pressure management devices, providing a plurality of a sensing conduits, and fluidly coupling the plurality of pressure management devices in a one-to-one fashion to the plurality of sensing conduits. Each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits and a reduced-pressure delivery conduit of the plurality of reduced-pressure delivery conduits associated with the reduced-pressure dressing. Each pressure management device of the plurality of pressure management devices may include a power unit electrically coupled to the controller for providing power to the controller, a force transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and an indicator coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

According to another illustrative embodiment, a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient includes a reduced-pressure source for providing reduced pressure, a pressure management module, a first conduit fluidly coupled between the reduced-pressure source and the pressure management module, a plurality of reduced-pressure delivery conduits fluidly coupled between the pressure management module and a plurality of reduced-pressure dressings. The plurality of reduced-pressure dressings are coupled to the

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plurality of reduced-pressure delivery conduits in a one-to-one fashion. The system further includes a plurality of a sensing conduits fluidly coupled to the pressure management module. Each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits and a reduced-pressure delivery conduit of the plurality of reduced-pressure delivery conduits associated with the reduced-pressure dressing. The pressure management module comprises a plurality of pressure management devices. Each pressure management device of the plurality of pressure management devices may include a power unit electrically coupled to the controller for providing power to the controller, a force transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and an indicator coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

According to another illustrative embodiment, a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient includes a reduced-pressure source for providing reduced pressure and a first plurality of reduced-pressure delivery conduits fluidly coupled to the reduced-pressure source. Each reduced-pressure delivery conduit of the first plurality of reduced-pressure delivery conduits has a first end and a second end. The second end of each of the first plurality of reduced-pressure delivery conduits has a first pressure-management connector coupled thereto. The system further includes a second plurality of reduced-pressure delivery conduits, each having a first end and a second end. The first end of the second plurality of reduced-pressure delivery conduits has a second pressure-management connector. The system further includes a plurality of reduced-pressure dressings fluidly coupled to the second plurality of reduced-pressure delivery conduits in a one-to-one fashion. The first pressure management connector of the plurality of reduced-pressure conduits is coupled to the second pressure-management connector of the second plurality of reduced-pressure in a one-to-one fashion. The first pressure management connector and second management connector couple to form a pressure management device, whereby the first pressure management connectors and the second pressure management connectors form a plurality of pressure management devices. Each reduced-pressure dressing has one of the second reduced-pressure delivery conduits associated with the reduced-pressure dressing. Each pressure management device of the plurality of pressure management devices includes a controller, a power unit electrically coupled to the controller for providing power to the controller, a force transducer associated with a sensing conduit of the first plurality of reduced-pressure conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and an indicator coupled to the controller for indicating when insufficient pressure exists at the associated sensing conduit.

Other features and advantages of the illustrative embodiments will become apparent with reference to the drawings and detailed description that follow.

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 is a schematic diagram, with a portion shown in cross section, of an illustrative, non-limiting embodiment of a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient;

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FIG. 2 is a schematic diagram of a portion of an illustrative embodiment of a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient showing an illustrative, non-limiting configuration of a pressure management device;

FIG. 3 is a schematic, elevation view of an illustrative embodiment of an integral module formed from a plurality of pressure management devices;

FIG. 4 is a schematic, elevation view of an illustrative embodiment of an integral module that involves a conduit delivering reduced pressure that is split to provide reduced pressure to a plurality of reduced-pressure delivery conduits; and

FIG. 5 is a schematic, perspective view, with a portion shown as a diagram and a portion as a cross section, of another illustrative embodiment of a portion of a system for managing reduced pressure at multiple tissue sites undergoing reduced pressure treatment on a patient.

DETAILED DESCRIPTION OF ILLUSTRATIVE EMBODIMENTS

In the following detailed description of the illustrative, non-limiting embodiments, reference is made to the accompanying drawings that form a part hereof. These embodiments are described in sufficient detail to enable those skilled in the art to practice the invention, and it is understood that other embodiments may be utilized and that logical structural, mechanical, electrical, and chemical changes may be made without departing from the spirit or scope of the invention. To avoid detail not necessary to enable those skilled in the art to practice the embodiments described herein, the description may omit certain information known to those skilled in the art. The following detailed description is, therefore, not to be taken in a limiting sense, and the scope of the illustrative embodiments are defined only by the appended claims.

Reduced pressure provided to tissue sites encourages healing at those tissue sites. To accommodate multiple tissue sites, e.g., multiple wounds on a patient, multiple conduits may be used to deliver reduced pressure. A single reduced pressure source may be used with, the multiple conduits branched off one conduit. Pressure monitoring is currently located in existing reduced-pressure sources and only one conduit communicates pressure to the reduced-pressure source. If only one conduit, which is associated with one tissue site, is monitored, as is the case when monitoring is done at the reduced-pressure source alone, pressure at other tissue sites may be unmonitored. This means that the pressure at the different tissue sites may vary greatly and yet go unnoticed. This, in turn, may cause a detrimental result in some situations. For example, if a graft does not receive reduced pressure for two hours, the graft may not take. With the current system, each tissue site of the plurality of tissue sites is monitored, and issues with reduced pressure delivery may be identified and addressed. An illustrative embodiment of a system **100** is presented that includes, among other things, pressure monitoring at multiple tissue sites.

Referring now to the drawings and initially to FIG. 1, the system **100** for managing reduced pressure at a plurality of tissue sites **102** that are undergoing reduced pressure treatment on a patient **104** is presented. A plurality of reduced-pressure dressings **106** are used with the plurality of tissue sites **102**. Typically, one of the plurality of reduced-pressure dressings **106** is associated with one of the plurality of tissue sites **102**. The tissue sites **102** may comprise a single extended tissue site or wound or may be discrete wound sites or tissue sites. Each of the tissue sites **102** may be the bodily tissue of

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any human, animal, or other organism, including bone tissue, adipose tissue, muscle tissue, dermal tissue, vascular tissue, connective tissue, cartilage, tendons, ligaments, or any other tissue. Unless otherwise indicated, as used throughout this document, “or” does not require mutual exclusivity. Treatment of the tissue sites **102** may include removal of fluids, e.g., exudate or ascites.

The plurality of reduced-pressure dressings **106** in the illustrative embodiment of FIG. **1** is shown with a first reduced-pressure dressing **108** and a second reduced-pressure dressing **110**. The plurality of reduced-pressure dressings **106** may include any structure suitable for providing reduced pressure to a tissue site and removing fluids. For example, in one illustrative embodiment, the first reduced-pressure dressing **108** includes a manifold **112** that is disposed proximate to one of the tissue sites **102** with which the manifold **112** is associated. The manifold **112** is covered with a sealing member **114**, which may include an attachment device **116**, that creates a fluid seal. A fluid seal is a seal adequate to maintain reduced pressure at a desired tissue site given the particular reduced-pressure source or subsystem involved. The sealing member **114**, which may include the attachment device **116**, creates a sealed space **118** in which the manifold **112** may reside. A reduced-pressure interface **120** may be placed through an aperture (not shown) and the sealing member **114** to provide reduced pressure into the sealed space **118** and in particular to the manifold **112**. For example, the reduced pressure interface **120** may be a T.R.A.C.® Pad or Sensa T.R.A.C.® Pad available from KCI of San Antonio, Tex. The reduced-pressure interface **120** delivers the reduced pressure to the sealed space **118**. The second reduced-pressure dressing **110** is analogous to the first reduced-pressure dressing **108**.

With respect to the manifold **112**, a manifold is generally a substance or structure that is provided to assist in applying reduced pressure to, delivering fluids to, or removing fluids from a tissue site, e.g., tissue site **102**. The manifold **112** typically includes a plurality of flow channels or pathways that distribute fluids provided to and removed from the tissue site **102** around the manifold **112**. In one illustrative embodiment, the flow channels or pathways are interconnected to improve distribution of fluids provided or removed from the tissue site **102**. The manifold **112** comprises one or more of the following: a biocompatible material that is capable of being placed in contact with the tissue site **102** and distributing reduced pressure to the tissue site **102**; devices that have structural elements arranged to form flow channels, such as, for example, cellular foam, open-cell foam, porous tissue collections, liquids, gels, and foams that include, or cure to include, flow channels; material that may be porous and may be made from foam, gauze, felted mat, or any other material suited to a particular biological application; foam with interconnected cells; polyurethane; open-cell, reticulated foam such as GranuFoam® material manufactured by Kinetic Concepts, Incorporated of San Antonio, Tex.; bioresorbable material; or scaffold material. In some situations, the manifold **112** may also be used to distribute fluids such as medications, antibacterials, growth factors, and various solutions to the tissue site **102**. Other layers may be included in or on the manifold **112**, such as absorptive materials, wicking materials, hydrophobic materials, and hydrophilic materials.

In one illustrative embodiment, the manifold **112** may be constructed from bioresorbable materials that do not have to be removed from a patient's body following use of the reduced-pressure dressing **108**, **110**. Suitable bioresorbable materials may include, without limitation, a polymeric blend of polylactic acid (PLA) and polyglycolic acid (PGA). The

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polymeric blend may also include without limitation polycarbonates, polyfumarates, and caprolactones. The manifold **112** may further serve as a scaffold for new cell-growth, or a scaffold material may be used in conjunction with the manifold **112** to promote cell-growth. A scaffold is a substance or structure used to enhance or promote the growth of cells or formation of tissue, such as a three-dimensional porous structure that provides a template for cell growth. Illustrative examples of scaffold materials include calcium phosphate, collagen, PLA/PGA, coral hydroxy apatites, carbonates, or processed allograft materials.

The sealing member **114** may be any material that provides a fluid seal. The sealing member **114** may, for example, be an impermeable or semi-permeable, elastomeric material. Examples of elastomers may include, but are not limited to, natural rubbers, polyisoprene, styrene butadiene rubber, chloroprene rubber, polybutadiene, nitrile rubber, butyl rubber, ethylene propylene rubber, ethylene propylene diene monomer, chlorosulfonated polyethylene, polysulfide rubber, polyurethane (PU), EVA film, co-polyester, and silicones. Additional, specific examples of sealing member materials include a silicone drape, 3M Tegaderm® drape, polyurethane (PU) drape such as one available from Avery Dennison Corporation of Pasadena, Calif.

The attachment device **116** may be used to hold the sealing member **114** against the patient's epidermis **111** or another layer, such as a gasket or additional sealing member, or another location. The attachment device **116** may take numerous forms. For example, the attachment device **116** may be a medically acceptable, pressure-sensitive adhesive that extends about a periphery of the sealing member **114**.

The reduced-pressure dressings **106** provide reduced pressure to the tissue sites **102**. Reduced pressure is generally a pressure less than the ambient pressure at a tissue site that is being subjected to treatment. In most cases, this reduced pressure will be less than the atmospheric pressure at which the patient is located. Alternatively, the reduced pressure may be less than a hydrostatic pressure at the tissue site. Unless otherwise indicated, values of pressure stated herein are gauge pressures. The reduced pressure delivered may be constant or varied (patterned or random) and may be delivered continuously or intermittently. Although the terms “vacuum” and “negative pressure” may be used to describe the pressure applied to the tissue site, the actual pressure applied to the tissue site may be more than the pressure normally associated with a complete vacuum. Consistent with the use herein, an increase in reduced pressure or vacuum pressure typically refers to a relative reduction in absolute pressure.

A plurality of reduced-pressure delivery conduits **122** may be fluidly coupled to a reduced-pressure source **124**. The reduced-pressure delivery conduits **122** may be conduits for carrying reduced pressure and removing liquids alone or may be combined with one or more lumens for sensing pressure and providing a vent or a purge. For description purposes, a distinct plurality of sensing conduits **126**, or lumens, is shown associated with the plurality of reduced-pressure delivery conduits **122**, but it should be understood that the sensing conduits **126** may be incorporated into the plurality of reduced-pressure delivery conduits **122** as a lumen in a multi-lumen conduit.

The reduced-pressure source **124** provides reduced pressure. The reduced-pressure source **124** may be any device or source for supplying a reduced pressure, such as a vacuum pump, wall suction, micro-pump, or other source. If the reduced-pressure source **124** is a micro-pump, the micro-pump may be directly coupled to the plurality of management devices **128**. While the amount and nature of reduced pressure

applied to a tissue site will typically vary according to the application, the reduced pressure will typically be between -5 mm Hg (-667 Pa) and -500 mm Hg (-66.7 kPa) and more typically between -75 mm Hg (-9.9 kPa) and -300 mm Hg (-39.9 kPa). For example, and not by way of limitation, the pressure may be -12, -12.5, -13, -14, -14.5, -15, -15.5, -16, -16.5, -17, -17.5, -18, -18.5, -19, -19.5, -20, -20.5, -21, -21.5, -22, -22.5, -23, -23.5, -24, -24.5, -25, -25.5, -26, -26.5 kPa or another pressure.

The plurality of pressure management devices **128** may be coupled to the plurality of reduced-pressure delivery conduits **122** and fluidly coupled to the plurality of sensing conduits **126**. The plurality of pressure management devices **128** may include, for example, a first pressure management device **130** and a second pressure management device **132**. Each of the plurality of pressure management devices **128** may include a housing **134**. The housing **134** may include a visual indicator **136** that may include indicators such as pressure disruption or caution symbol **138** and a touch mute button **140**. A manual power switch **142** may also be included on the housing **134** or on the visual indicator **136**. Each housing **134** may include a first portion **144** and a second portion **146** or edge. A first coupling member **148**, which may include two components, may be coupled to the first portion **144**. A second coupling member **150** may be formed on the second portion **146**. The first coupling member **148** and the second coupling member **150** are sized and configured to couple with one another either fixedly or releasably. As described further below in connection with FIG. 3, the optional coupling members **148**, **150** allow the plurality of pressure management devices **128** to be combined to form an integral module, i.e., a single unit. Other techniques and devices, e.g., fasteners or clips, may be used to couple the pressure management devices **128**.

Referring now primarily to FIG. 2, the system **100** for managing reduced pressure at the plurality of tissue sites **102** is presented in diagram form with only the first pressure management device **130** of the plurality of pressure management devices **128** shown. It should be understood that any number of additional pressure management devices **128** may be combined as part of the system **100**. Additional aspects of the first pressure management device **130** may be explained in more detail with reference to FIG. 2.

The first pressure management device **130** is fluidly coupled to one of the plurality of sensing conduits **126**, and the sensing conduit **126** is fluidly coupled to a force transducer **152** (or pressure gauge) within the first pressure management device **130**. The force transducer **152** is able to develop a signal, e.g., an electrical signal, that indicates the pressure within the sensing conduit **126** or is otherwise able to detect various thresholds of pressure. The force transducer **152** is coupled at **154** to a controller **156**. The controller **156** may be a printed wire assembly (PWA) or an application specific integrated circuit (ASIC), a microprocessor with associated memory, or other controller device.

The controller **156** is able to thus monitor the pressure within the sensing conduit **126** and thereby to monitor pressure proximate to the tissue site **102**. The controller **156** receives power from a power unit **158**, such as a battery or other source of electrical power. The power unit **158** is coupled at **159** to the controller **156**. When the controller **156** determines that the reduced pressure within the sensing conduit **126** is inadequate (e.g., below a reduced-pressure threshold), such as may be caused by a leak in the reduced-pressure dressing associated with the particular sensing conduit **126** or a blockage or other problem, the controller **156** may activate or modify an indicator, such as an audible indicator **160** (or alarm) or a visual indicator **162**. The audible indicator **160** is

shown coupled at **161** to the controller **156**. The visual indicator **162** is shown coupled at **163** to the controller **156**. A mute switch or button **164** may be associated with the controller **156** and is shown coupled at **166**. The mute switch **164** may allow a user to silence the audible indicator **160**. Other user interfaces may be coupled to the controller **156** to control other aspects of the first pressure management device **130**.

A portion of the reduced-pressure delivery conduit **122** may extend through the first pressure management device **130**, and an activation sensor or transducer **168** may be fluidly coupled to the reduced-pressure delivery conduit **122**. The activation sensor **168** can detect the presence of reduced pressure and provide a signal **170** to the controller **156**. The controller **156** may compare the pressure delivered through the reduced-pressure delivery conduit **122** with the sensing pressure in the sensing conduit **126** to make certain determinations concerning performance and may also use the signal from the activation sensor **168** to continue to run controller **156** and other aspects of the first pressure management device **130**.

Referring now primarily to FIGS. 1 and 2, in operation, according to one illustrative embodiment, a user may apply the plurality of reduced-pressure dressings **106** to the plurality of tissue sites **102**. For example, the manifold **112** of the first reduced-pressure dressing **108** may be placed against the tissue site **102** and then be covered by the sealing member **114** to create the sealed space **118**. A reduced pressure interface **120**, if not already installed, may be installed to provide reduced pressure to the sealed space **118** or otherwise to the manifold **112**. Other reduced-pressure dressings may be applied to each tissue site **102** for which treatment is desired.

The plurality of reduced-pressure delivery conduits **122** may be fluidly coupled to the reduced-pressure source **124** in a one-to-one fashion. In this regard, the reduced-pressure source **124** may have a first conduit **172** (FIG. 1) that goes to a branching member or splitter **174** that fluidly couples the plurality of reduced-pressure delivery conduits **122** to the reduced-pressure source **124**. The plurality of sensing conduits **126** are fluidly coupled to the plurality of pressure management devices **128**.

The reduced-pressure source **124** is activated and begins to deliver reduced pressure to the plurality of reduced-pressure dressings **106**. The plurality of pressure management devices **128** may be activated either automatically by the activation sensors **168** or manually by the user using an interface such as power switch **142**. Thus, reduced pressure is delivered to the tissue sites **102** and is monitored for each tissue site **102**. If there is a problem with the reduced pressure delivery at a tissue site **102** as sensed by one of the plurality of sensing conduits **126**, the pressure management device **128** associated with that particular sensing conduit of the plurality of sensing conduits **126** will sense the inadequate pressure via the associated force transducer **152**. The controller **156**, which monitors the force transducer **152**, will then provide an indication using the audible indicator **160** or the visual indicator **162**. The user may then identify which reduced-pressure dressing of the plurality of reduced-pressure dressings **106** is having the difficulty. Corrective action may then be readily taken.

As shown in FIG. 3, the plurality of pressure management devices **128** may be coupled using the first coupling members **148** and the second coupling members **150** to form an integral module **176**. The integral module **176** provides for more convenient movement by the user and may also be more aesthetic.

Referring now primarily to FIG. 4, an illustrative embodiment of an integral module **176** or pressure management

module **176** is presented that is analogous in most respects to the integrated module **176** shown in FIG. 3. Accordingly, some parts are labeled but not further described here. There are, however, two main differences. First, the integrated module **176** of FIG. 4 may be manufactured with three otherwise independent pressure management devices is a single housing **178**. Second, and related, the integrated pressure management module **176** functions as a junction or branching member or splitter to receive reduced pressure from a first conduit **172** from a reduced-pressure source and to provide reduced pressure to each of the plurality of pressure management devices **128** for delivery through a plurality of reduced-pressure delivery conduits **122**. While not explicitly shown, associated with or formed as part of the reduced-pressure delivery conduits **122** is a plurality of pressure sensing lumens or conduits. The plurality of sensing lumens allows the plurality of pressure management devices to monitor pressure at a plurality of tissue sites. At least one reduced-pressure delivery conduit **122** may be a sensing lumen that provides pressure for sensing purposes to the reduced-pressure source, e.g., reduced-pressure source **124** in FIG. 1.

Referring again primarily to FIG. 2, another illustrative embodiment of system **100** will be presented. With respect to this embodiment of system **100**, the reduced pressure delivered by reduced-pressure source **124** may be at a reduced pressure greater (more negative on an absolute pressure scale) than required anywhere in the system **100** and then stepped down to the desired pressure at various locations. Thus, as an aspect of each of the plurality of pressure management devices **128**, a pressure regulating valve **182** may be provided to adjust the reduced pressure delivered from the reduced-pressure source **124** to the specific pressure desired for a particular tissue site **102** associated with that particular pressure management device.

The pressure regulating valve **182** may have an adjustment control **184** for setting the desired pressure. Thus, as one example, a single reduced-pressure source **124** may be used that provides relatively higher reduced pressure (for example, but not by way of limitation, -200 mm Hg) and then adjusted by the pressure regulating valve **182** to a first desired pressure (e.g., but not by way of limitation, to -150 mm Hg) and delivered to a tissue site from which a graft has been taken. The system **100** also provides reduced pressure to a reduced-pressure dressing at the tissue site where the graft has been placed and may do so at a second desired pressure that is relatively less than the first desired pressure (e.g., but not by way of limitation, -50 mm Hg). In another illustrative embodiment, the controller **156** may control the adjustment control **184**. The desired pressure may be set by a user using a user interface to the controller **156**.

Referring now primarily to FIG. 5, an illustrative, non-limiting system **200** for managing reduced pressure at a plurality of tissue sites, e.g., tissue site **202**, undergoing reduced pressure treatment on a patient **204** is presented. The system **200** is analogous in many respects to the system **100** of FIG. 1. While only one reduced-pressure dressing **208** and one pressure management device **228** is shown, it should be understood that the system **200** contemplates a plurality of each. The plurality of reduced-pressure dressings, such as reduced pressure dressing **208**, is placed on the tissue sites, e.g., tissue site **202**. With each reduced-pressure dressing, a reduced-pressure interface **220** may be used to provide reduced pressure to a sealed space **218** that contains a manifold **212** and also allows for sensing of the pressure in the sealed space **218**.

A reduced-pressure source **224** delivers reduced pressure to a first plurality of reduced-pressure delivery conduits **223**.

A first conduit **272** may be used to deliver the reduced pressure to one or more splitters **274** or distributors that are fluidly coupled to the first plurality of reduced-pressure delivery conduits **223**. Each of the first reduced-pressure delivery conduits **223** has a first end **225** and a second end **227**. Coupled to the second end **227** of each of the first reduced-pressure delivery conduits **223** is a first pressure management connector **286**. A second pressure management connector **288** is releasably coupled to the first pressure management connector **286** to form a pressure management device **228**. A second plurality of reduced-pressure delivery conduits **290** may be used to fluidly couple the reduced-pressure interface **220** to the associated second pressure management connector **288** for each reduced-pressure dressing. Each of the second plurality of reduced-pressure delivery conduits **290** has a first end **292** and a second end **294**. The second pressure management connector **288** is coupled to the first end **292** of the associated conduit of the second plurality of reduced-pressure conduits **290**.

Each pressure management device **228** created by coupling the first pressure management connector **286** and the second pressure management connector **288** provides both a fluid coupling and may also function analogously to the pressure management devices **128** of FIGS. 1-3 with respect to monitoring and control. The pressure management devices **228** provide a quick connection and also readily allow for one portion, e.g., the first pressure management connector **286**, to be reused and for another portion, e.g., the second pressure management connector **288**, to be discarded after use. Physically coupling the connectors **286**, **288** may also provide an electrical connection between the connectors **286**, **288**. Referring back to FIG. 2 again, various components of the first pressure management device **130** may be associated with either of the connectors **286**, **288** of the pressure management device **228**.

In one illustrative embodiment, the audible indicator **160** and visual indicator **162** may be associated with the first pressure management connector **286**. The controller **156**, power unit **158**, mute switch **164**, and force transducer **152** may be associated with the second pressure management connector **288**. Various combinations and permutations of the components may be associated with the two connectors **286**, **288**. The pressure regulating valve **182** may also be associated with the second pressure management connector **288**.

As used herein, the term "coupled" includes coupling via a separate object and includes direct coupling. The term "coupled" also encompasses two or more components that are continuous with one another by virtue of each of the components being formed from the same piece of material. Also, the term "coupled" may include chemical, such as via a chemical bond, mechanical, thermal, or electrical coupling. Fluid coupling means that fluid may be in communication between the designated parts or locations.

In another illustrative embodiment, the pressure management device may have no electronics and may use a physical device to monitor pressure and to indicate inadequate pressure. For example, a pop-up pressure valve may be associated with each sensing lumen that is compressed under adequate reduced pressure, but expands and is visible when inadequate reduced pressure exists.

The pressure management devices **128** may be used with any reduced-pressure source, which may be any device for supplying a reduced pressure, such as a vacuum pump, wall suction, or other source. With the inclusion of a pressure regulating valve **182**, the pressure management devices **128**

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allow for a single reduced-pressure source to supply and monitor reduced pressure at different pressures at different tissue sites.

The reduced-pressure source may be a monitored system that monitors one tissue site from which one conduit is fluidly coupled, and the pressure management devices may be added to the additional conduits associated with additional tissue sites.

Referring again generally to FIGS. 1 and 4, in another illustrative embodiment, a system 100 for managing reduced pressure at a plurality of tissue sites 102 that are undergoing reduced pressure treatment on a patient 104 is presented. In this illustrative embodiment, an integral module 176 has a plurality of pressure management devices 128 similar to those presented in FIG. 4, but with only one controller (not explicitly shown) for the integral module 176. The force transducers associated with each pressure management device 128 are coupled to the one controller for the integral module 176.

Although the present invention and its advantages have been disclosed in the context of certain illustrative, non-limiting embodiments, it should be understood that various changes, substitutions, permutations, and alterations can be made without departing from the scope of the invention as defined by the appended claims. It will be appreciated that any feature that is described in connection to any one embodiment may also be applicable to any other embodiment.

It will be understood that the benefits and advantages described above may relate to one embodiment or may relate to several embodiments. It will further be understood that reference to “an” item refers to one or more of those items.

The steps of the methods described herein may be carried out in any suitable order, or simultaneously where appropriate.

Where appropriate, aspects of any of the embodiments described above may be combined with aspects of any of the other embodiments described to form further examples having comparable or different properties and addressing the same or different problems.

It will be understood that the above description of preferred embodiments is given by way of example only and that various modifications may be made by those skilled in the art. The above specification, examples and data provide a complete description of the structure and use of exemplary embodiments of the invention. Although various embodiments of the invention have been described above with a certain degree of particularity, or with reference to one or more individual embodiments, those skilled in the art could make numerous alterations to the disclosed embodiments without departing from the scope of the claims.

We claim:

1. A system for managing reduced pressure at a plurality of tissue sites undergoing reduced pressure treatment on a patient, the system comprising:

- a reduced-pressure source for providing reduced pressure;
- a plurality of reduced-pressure delivery conduits fluidly coupled to the reduced-pressure source;
- a plurality of reduced-pressure dressings fluidly coupled to the plurality of reduced-pressure delivery conduits in a one-to-one fashion;
- a plurality of pressure management devices;
- a plurality of sensing conduits fluidly coupled to the plurality of pressure management devices in a one-to-one fashion;

wherein each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits associated with the reduced-pressure dressing; and

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wherein each pressure management device of the plurality of pressure management devices comprises:

- a housing, the housing of at least one of the pressure management devices configured to be coupled in direct contact with the housing of another of the pressure management devices;

- a controller positioned in the housing,

- a power unit positioned in the housing and electrically coupled to the controller for providing power to the controller,

- an activation sensor configured to run the controller upon detecting reduced pressure,

- a force transducer positioned in the housing and associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and

- an indicator positioned on the housing and coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

2. The system of claim 1, wherein the activation sensor is fluidly coupled to a reduced-pressure delivery conduit associated with the pressure management device and electrically coupled to the controller.

3. The system of claim 1, wherein the indicator is selected from the group of an audible indicator and a visual indicator.

4. The system of claim 1, wherein each pressure management device further comprises a muting switch.

5. The system of claim 1, wherein the plurality of pressure management devices are coupled to form an integral module.

6. The system of claim 1, wherein each of the plurality of reduced-pressure dressings comprises: a manifold for placing proximate to the tissue site, a sealing member for covering the manifold and tissue site to create a sealed space, and a reduced-pressure interface for providing reduced pressure to the sealed space.

7. The system of claim 1, wherein each of the plurality of pressure management devices comprises:

- a first coupling member coupled to a first portion of the housing,

- a second coupling member coupled to a second portion of the housing, and

wherein the first coupling member is sized and configured to couple with the second coupling member on another of the plurality of pressure management devices, whereby adjacent pressure management devices may be coupled.

8. A method for managing reduced pressure at a plurality of tissue sites undergoing reduced pressure treatment on a patient, the method comprising:

- providing a reduced-pressure source;

- fluidly coupling a plurality of reduced-pressure delivery conduits to the reduced-pressure source;

- disposing a plurality of reduced-pressure dressings proximate to the plurality of tissue sites;

- fluidly coupling the plurality of reduced-pressure dressings to the plurality of reduced-pressure delivery conduits;

- providing a plurality of pressure management devices for monitoring pressure, each of the pressure management devices comprising a housing and being configured to be automatically activated upon detecting reduced pressure;

- coupling the housing of at least one of the pressure management devices in direct contact with the housing of another of the pressure management devices;

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fluidly coupling a plurality of a sensing conduits to the plurality of pressure management devices in a one-to-one fashion; and

wherein each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits associated with the reduced-pressure dressing. 5

9. The method of claim 8, further comprising coupling the plurality of pressure management devices together to form an integral module.

10. The method of claim 8, wherein each of the plurality of reduced-pressure dressings comprises: a manifold for placing proximate to the tissue site, a sealing member for covering the manifold and tissue site to create a sealed space, and a reduced-pressure interface for providing reduced pressure to the sealed space. 10 15

11. The method of claim 8, wherein each pressure management device of the plurality of pressure management devices comprises:

a controller,

a power unit electrically coupled to the controller for providing power to the controller, 20

a force transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and 25

an indicator coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

12. The method of claim 11, wherein each pressure management device further comprises an activation sensor fluidly coupled to a reduced-pressure delivery conduit associated with the pressure management device and electrically coupled to the controller, the activation sensor configured to run the controller and to activate the pressure management device upon detecting reduced pressure in the reduced-pressure delivery conduit. 30 35

13. The method of claim 11, wherein the indicator is selected from the group of an audible indicator and a visual indicator. 40

14. The method of claim 11, wherein each pressure management device further comprises a muting switch.

15. A system for managing reduced pressure at a plurality of tissue sites undergoing reduced pressure treatment on a patient, the system comprising: 45

a reduced-pressure source for providing reduced pressure;

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a pressure management module comprising a plurality of pressure management devices, each pressure management device including a housing, the housing of at least one of the pressure management devices configured to be coupled in direct contact with the housing of another of the pressure management devices;

a first conduit fluidly coupled between the reduced-pressure source and the pressure management module for supplying reduced pressure to the pressure management module;

a plurality of reduced-pressure dressings;

a plurality of reduced-pressure delivery conduits fluidly coupled to the pressure management module;

wherein the plurality of reduced-pressure dressings are coupled to the plurality of reduced-pressure delivery conduits;

a plurality of sensing conduits fluidly coupled to the pressure management module; and

wherein each reduced-pressure dressing has a sensing conduit of the plurality of sensing conduits associated with the reduced-pressure dressing.

16. The system of claim 15, wherein each pressure management device of the plurality of pressure management devices comprises:

a controller,

a power unit electrically coupled to the controller for providing power to the controller,

a force transducer associated with a sensing conduit of the plurality of sensing conduits and electrically coupled to the controller for determining if a reduced-pressure threshold exists at a tissue site associated with the sensing conduit, and

an indicator coupled to the controller for indicating when insufficient pressure exists in an associated sensing conduit.

17. The system of claim 15, wherein each pressure management device further comprises an activation sensor fluidly coupled to the first conduit and electrically coupled to the controller, the activation sensor configured to activate the pressure management device upon detecting reduced pressure in the first conduit.

18. The system of claim 15, wherein the indicator is selected from the group of an audible indicator and a visual indicator.

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